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On 6-17-04

TOWNSEND and TOWNSEND and CREW LLP

By: Linda Shaffer

PATENT
Attorney Docket No.: 018781-004110
Client Ref. No.: T99-021-1US

1646
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Rhw

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Jurgen M. Lehmann *et al.*

Application No.: 09/760,364

Filed: January 12, 2001

For: CAR MODULATORS:
SCREENING AND TREATMENT OF
HYPERCHOLESTEROLEMIA

Customer No.: 20350

Confirmation No. 1585

Examiner: Joseph F. Murphy

Technology Center/Art Unit: 1646

AMENDMENT

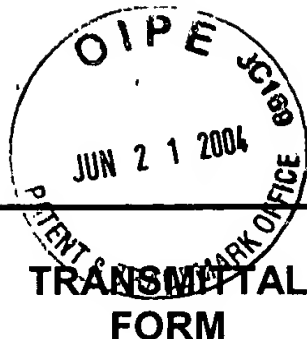
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed December 17, 2003, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.



TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/760,364	
	Filing Date	January 12, 2001	
	First Named Inventor	Lehmann, Jorgen M.	
	Art Unit	1646	
	Examiner Name	Joseph F. Murphy	
Total Number of Pages in This Submission	1	Attorney Docket Number	018781-004110

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Townsend and Townsend and Crew LLP Eugenia Garret-Wackowski Reg. No. 37,330
Signature	<i>Eugenia Garret-Wackowski</i>
Date	6/17/04

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Typed or printed name	Linda Shaffer
Signature	<i>Linda Shaffer</i>
Date	6/17/14